



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 10

1200 Sixth Avenue
Seattle, Washington 98101

August 5, 2002

Reply To

Attn Of: WCM-121

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Mr. Rob Hartman
FMC Corporation Pocatello Plant
Highway 30 west
P.O. Box 4111
Pocatello, Idaho 83202

RE: Approval of the Anderson Filter Media Washing
Unit Closure Plan and the Drum Storage Area
Closure Plan at the Astaris Pocatello Facility,
EPA ID # 07092 9518

Dear Mr. Hartman:

On July 26, 2000 FMC/Astaris submitted a Closure Plan for the Andersen Filter Media Washing Unit and the Drum Storage Unit. From February 1, 2001 through March 2, 2001, EPA provided the public with an opportunity to review and comment on the plan. No comments were received from the public.

In accordance with 40 C.F.R. § 265.112(d)(4) EPA is approving the Closure Plan for the Andersen Filter Media Washing Unit and the Closure Plan for the Drum Storage Unit dated July 26, 2000.

If you have any questions, please contact Linda Meyer at (206) 553-6636.

Sincerely,

Montell Livingston
for

Richard Albright, Director
Office of Waste and Chemicals Management

cc: Susan Hanson, Shoshone-Bannock Tribes

FILE COPY

ID 9518
8/5/02
17a
EPA ID#
9518
8/5/02

bcc: Sylvia Burges, RCRA Compliance
 Andy Boyd, ORC
 Gil Haselberger, MD
 Mark Maserik, IOO

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Received by (Please Print Clearly) <i>RE Edward</i> B. Date of Delivery <i>8-8</i> C. Signature <i>X Bob Edwards</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
1. Article Addressed to: Mr. Rob Hartman FMC Corp - Pocatello Plant Highway 30 West PO Box 4111 Pocatello, ID 83202		<div style="text-align: center;"> RECEIVED AUG 12 2002 </div> OFFICE OF WASTE 3. Service Type & CHEM. MGMT. <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Copy from service label) <i>7000 0600 0027 0475 1007</i>			
PS Form 3811, July 1999		Domestic Return Receipt 102595-99-M-1789	

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only. No Insurance Coverage Provided)											
7000 0600 0027 0475 1007	<table border="1"> <tr> <td>Postage</td> <td>\$</td> </tr> <tr> <td>Certified Fee</td> <td></td> </tr> <tr> <td>Return Receipt Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td>Restricted Delivery Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td>Total Postage & Fees</td> <td>\$</td> </tr> </table>	Postage	\$	Certified Fee		Return Receipt Fee (Endorsement Required)		Restricted Delivery Fee (Endorsement Required)		Total Postage & Fees	\$
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Restricted Delivery Fee (Endorsement Required)											
Total Postage & Fees	\$										
	Postmark Here Recipient's Name (Please Print Clearly) (to be completed by mailer) <i>Rob Hartman, FMC Corp - Pocatello</i> Street, Apt. No., or PO Box No. <i>Plant, Hwy 30 W, P.O. Box 4111</i> City, State, ZIP+4 <i>Pocatello, ID 83202</i>										
	PS Form 3800, February 2000 See Reverse for Instructions										

AFM/Drum Storage Closure Plan Approvals
CONCURRENCES:

INITIALS	<i>Am</i>	<i>CB</i>			POLICY	FRICIS INFO SUBMITTED			
NAME	Meyer	Boyd			YES	NO	YES	NO	X
DATE	<i>8/21/01</i>	<i>8/22/01</i>			IF YES, BCC ATTACHED				

PEER REVIEW:

INITIALS			<i>CF</i>			<i>nan</i>
NAME	Palumbo	Fisher	Brown	Orlean	Hedeen	
DATE			8/22/01			8/22/01